

attentive study by practitioners equally with the students to whom it was directly addressed.

With us, specialists in hygiene hardly exist as yet as a class, and it is mainly upon the general practitioner that the burden of preventive medicine rests.

THE PLAGUE AT GLASGOW.

Now that the small but alarming epidemic of plague at Glasgow has come to an end, it is of use to review the circumstances connected with it, thereby to gain some knowledge which might be of aid should the plague break out in any of the cities on this continent. For we may take it that conditions in Glasgow are very similar to those present in the larger cities on this side.

The epidemic broke out on the 3rd of August. Two individuals, a child and its grandmother, sickened suddenly, the child dying in four the grandmother in six days. There had been no recognisable connection between the individuals or families to which they belonged and any previous case of the disease. The father of the child, it is true, worked at the docks some two miles away, but he had to deal only with home as distinct from foreign shipping and he did not contract the disease until after all the other members of his household. The symptoms in the two cases were those of acute enteritis and certificates of death were given for zymotic enteritis and acute enteritis respectively.

The day after the wake on these two cases, the husband of the grandmother fell ill; but he was not removed to the hospital until fifteen days had elapsed and then he was supposed to be suffering from typhoid fever. In the meantime, on the 19th of August, sudden illness developed in an adjacent street, in a family, members of which had been present at the wake, this time a child of ten being taken ill. On the 21st acute pneumonia was diagnosed and the child died. A wake was also held on this case. In rapid succession four other members of this family fell ill and on the 25th a member of another family who also associated with the first, developed symptoms resembling typhus fever.

Only upon the 25th of August did the possibility of the disease being plague first occur to the resident staff of the Belvidere Infectious Hospital, to which many of these cases had been taken. On the microscopical examination of the fluid from a bubo in one of the cases the staff found what they considered to be the bacillus pestis, a conclusion which was eventually abundantly confirmed by Professor Muir of Glasgow University.

Immediately every effort was made to trace the cases to a common focus, the infected area was mapped out, in this area the ash-pits were